

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|-----------|------------|-----------------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | <i>RM</i> | <i>571</i> | <i>12/27</i> |
| FORMALITY REVIEW | <i>RM</i> | <i>571</i> | <i>03/28/01</i> |
| RESPONSE FORMALITY REVIEW | <i>RM</i> | <i>571</i> | <i>01-24-01</i> |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 u Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
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If more than 150 claims or 10 staples additional sheet here

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10/27/01